

REMARKS

In the Office Action the Examiner has made final the restriction of previously withdrawn claims 14-20 and 21-23. Further, the Examiner has rejected claims 1-7 for being anticipated by Abele et al. (USP 5,704,913); and the Examiner has rejected claims 1 and 8-10 for being anticipated by O'Neill et al. (USP 5,395,331). The Office Action initially notes that claims 11-13 are rejected; however, no prior art reference or combination of prior art references is expressly cited as supporting any rejection of these claims. Nevertheless, the patentability of claims 11-13 over Abele et al. and O'Neill et al. is addressed below.

In response to the Office Action, Applicant has canceled previously withdrawn claims 14-20 and 21-23. Also, Applicant has amended independent claims 1 and 11, and has added claims 24-31. Specifically, claims 1 and 11 have been amended to require that the protuberances be solid and extend radially from the outer surface, and that the system include a means for embedding the protuberances into a lesion and for anchoring the device to the lesion. Support for this amendment is found on page 7 at lines 6-20 and in Figures 3, 7 and 10. New independent claims 24 and 28 are drawn to a method for anchoring a device to a lesion and require the step of embedding protuberances into the lesion. Dependent claims 25-27 and 29-31 add further requirements to independent claims 24 and 28. Support for these amendments is found from page 8 at line 3 to page 9 at line 2.

Claims 1 and 11 have been amended, and claims 24-31 have been added, to improve the readability of the claims to more clearly define the structure and to point out the features which distinguish this invention over the cited art. Claims 1-13 and 24-31 are pending.

#### Rejections Under 35 U.S.C. § 102

Claims 1-7 have been rejected for being anticipated by Abele et al. (USP 5,704,913). Independent claim 1 has been amended to require that the protuberances be solid, and that the system includes a means for embedding the protuberances into the lesion and for anchoring the device to the lesion. Unlike the claimed invention, Abele et al. fail to teach or suggest that the protuberances be solid. Instead, the protuberances shown in the Abele et al. are formed by an inflatable balloon wall (18 in Fig. 10) which includes a void for receiving fluid. Further, Abele et al. do not disclose nor suggest that its protuberances be embedded into a lesion to anchor a device to the lesion. Specifically, Abele et al. disclose only "pressing of the balloon against the lesion being addressed." (Column 5, lines 48-49). Importantly, unlike the present invention, Abele et al. do not disclose or suggest the penetration of the lesion by its "protuberances" to embed therein to prevent longitudinal movement of the device in either direction.

For the reasons set forth above, Applicant believes the basis for rejecting claims 1-7 for being anticipated by Abele et al. has been overcome and should be withdrawn.

Claims 1 and 8-10 were rejected for being anticipated by O'Neill et al. (USP 5,395,331). Independent claim 1 has been amended to require that the protuberances extend radially outward from the outer surface of the flexible member, and that the system includes a means for embedding the protuberances into the lesion and for anchoring the device to the lesion. Unlike the claimed invention, O'Neill et al. fail to teach or suggest that the protuberances extend radially outward. Instead, O'Neill et al. only disclose protuberances that extend in a non-radial direction (as shown in Figures 3 and 7-11). Further, the O'Neill et al. reference discloses only "ribs or lands for frictionally engaging the coronary sinus." (Column 4, lines 42-43). Unlike the present invention, O'Neill et al. do not disclose or suggest the penetration of the lesion by its ribs or lands to allow the ribs or lands to embed therein to prevent longitudinal movement of the device in either direction.

For the reasons set forth above, Applicant believes the basis for rejecting claims 1 and 8-10 for being anticipated by O'Neill et al. has been overcome and should be withdrawn.

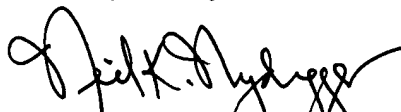
Regarding claims 11-13, it is noted that independent claim 11 also includes the requirements that the protuberances be solid and extend radially outward from the outer surface of the flexible member, and that the system includes a means for embedding the protuberances into the lesion and for anchoring the device to the lesion. Therefore, Applicant believes that claims 11-13 are patentable over the cited references.

As stated above, new independent claims 24 and 28 are drawn to a method for anchoring a device to a lesion. These method claims require the step of embedding protuberances into the lesion. As explained above, the cited references fail to disclose or suggest that protuberances be embedded into a lesion. Therefore, new claims 24-31 are patentable over the cited references.

In conclusion, Applicant respectfully asserts that claims 1-13 and 24-31 are patentable for the reasons set forth above, and that the application is now in a condition for allowance. Accordingly, an early notice of allowance is respectfully requested. The Examiner is requested to call the undersigned at 619-688-1300 for any reason that would advance the instant application to issue.

Dated this 8<sup>th</sup> day of March, 2005.

Respectfully submitted,



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